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increase, the rate for the last ten years being 30.5 per cent for the urban, and 5.5 per cent for the rural population. The results of the Danish census of February, 1901, coincide with those of the other countries considered; they show an accelerated increase in population due on the one hand to a growing excess of births over deaths, and due, geographically analyzed, to great growth of the towns, and especially of those of medium size.

C.-E. A. WINSLOW.

NOTES ON VITAL STATISTICS OF AMERICAN CITIES.

The Annual Report of the Board of Health of Manchester (N. H.) for 1900 illustrates the importance of correct estimates of population in calculating death-rates. The estimated population for 1896 was 56,000, with a death-rate of 18.77. In the next three years the population was estimated at 60,000, which, with a slight actual decrease in total deaths, brought the rates down to 16.97, 16.68 and 17.80. In 1900 the population was found to be 56,987 and the death-rate jumped to 20.47. The ratio of deaths of children under five years to the total deaths is interesting, showing a progressive decrease between 1897 and 1900 of 61.98, 52.04, 50.65 and 48.07. The table of cases of, and deaths from, zymotic diseases shows, apparently, unusual success in securing reports of measles and scarlet fever. There were 762 cases of measles with 5 deaths in 1899, and 827 cases with one death in 1900. On the other hand, 46 cases of diphtheria and membranous croup with 13 deaths indicates either poor reporting of cases or neglect of antitoxin treatment. separation of these diseases (diphtheria and membranous croup), in the table, and the summation of all the zymotic diseases are misleading.

The Annual Report of the Board of Health of Worcester (Mass), for 1900 contain some good anti-toxin statistics, as will be seen from the following table extracted from that on page 10 of the report.

FATALITY RATE .-- PER CENT.

Year.	Diphtheria.	Scarlet Fever.	Typhoid Fever
1895	27.55	3.78	17.98
1896	19.85	2.67	11.02
1897	17.62	3.14	15.00
1898	11.48	2.32	16.04
1899	10.61	.17	18.26
1900	9.46	7.59	21.76

The total death-rate for the city rises from 15.89 for 1899 to 18.77 in 1900, a higher figure than any since 1893. This excess is due to an excess of lung and throat troubles amounting to nearly one-third of the total deaths. In the diagram exhibiting the relation of the twenty principal causes of death a not unusual conservatism has prevented the classification of tuberculosis and pneumonia as zymotic diseases. It is strange that so few Boards of Health accept the progress of medical science in this respect.

The Annual Report of the Superintendent of Health of Providence (R. I.), (Dr. C. V. Chapin), for 1900 shows the same excess of measles which prevailed in Manchester, N. H., as noted above, and in many other cities. There were 97 deaths from this disease in Providence in 1900, more than the deaths from scarlet fever, typhoid fever and diphtheria combined, but only 901 cases were reported. Valuable tables are given for typhoid fever, diphtheria and scarlet fever, showing the number of cases and deaths in each month since 1884. The average fatality for the whole period is 29.61 for typhoid fever, 21.81 for diphtheria, and 8.90 for scarlet fever, all much too high. Dr. Chapin's statistics with regard to the ratio between cases of diphtheria and scarlet fever and the number of persons exposed to infection (members of families of patients), covering the period 1889-1900, are of great interest. The ratio of cases to the number of persons exposed, classified by ages, show a rise from 19.9 under one year, to 49.0 between one and two, and 65 and various fractions from two to five years; then a steady fall to 51.3 between 8 and 9, and 40.1 between 12 and 13, more variable figures ranging from 19.0 to 33.9 between 13 and 21, and a fall to 8.7 for adults. For scarlet fever the figures are very similar.

Under one year the rate is 24.3, between 1 and two years, 46.2, between 2 and 3 years, 59.2, between 3 and 8 years, from 63.5 to 69.4; from 8 to 17 years, an uninterrupted fall from 58.2 to 24.1; and for adults the ratio is only 4.7. Another table shows the percentage of well persons in families where diphtheria occurred in whose throats diphtheria bacilli were found. The average percentage for all ages for 1897-1900 was 16.2, the highest figures 34.1 and 34.0, being at the age of 4 and 6 years, and the figures for adults being 12.1.

More elaborate statistics for the city of Providence are found in the Forty-sixth Annual Report upon the Births, Marriages and Deaths for the year 1900, edited also by Dr. Chapin. This model report begins with an analysis of deaths by sex, social condition, nativity, parentage and season, in connection with which it is interesting to note, as typical of many American cities, that of 3678 decedents, only 2569 were natives of the United States and only 1402 were of American parentage. A table of the age of decedents by parentage shows that for forty-five years, 1856-1900, the average age of the children of American parents was 34-43 years, and for children of foreign parents, only 27.77. Deaths, classified by age periods, parentage and seasons follow, succeeded by tables of deaths by cause, sex, age, parentage and season. Each important cause of death is then studied, the statistics as to sex, parentage, age and season being given for forty-five years. The most striking fact in these tables is the extraordinary fatality from pneumonia and congestion of the lungs, in 1900, 261 per 100,000, the highest figure previously recorded being 217 for the period 1891-95. Of the 7568 deaths from these causes in 1900, 3062 occurred in the first quarter of the year, and 1379 of the decedents were under one year of age. The marriage statistics for forty-five years show average ages of 28.03 and 23.03 years for grooms and brides, respectively. Finally, the report contains an exhaustive analysis of birth statistics.

The Annual Report of the Bureau of Health of Philadelphia for 1900 contains rather meagre statistics considering the importance of the city. The high fatality rate for diphtheria is notable; in 1896 it was 31.96, and for the four following years, 27.28, 26.14, 20.40 and 17.97, respectively. The death rate for typhoid fever was 34.71 per

100,000 in 1900, an improvement over the epidemic figure of 1899, which was 74.82. Tables of the age distribution of typhoid fever and the monthly distribution of that disease and of scarlet fever and consumption for 39 years would be rendered more helpful by the printing of totals. An addition of the figures for typhoid fever deaths by age periods for the ten years, 1891-1900, gives the following result:

Years.	Deaths.	Years.	Deaths.
Inder 1	19	30-40	981
-2	20	40-50	455
-5	123	50-60	202
-10	323	60-70	112
0-15	386	70-80	47
5-20	796	80-90	9
0-30	1819	90–100	1

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STATISTICS OF DISEASES.

The Twenty-eighth Annual Report of the Secretary of the State Board of Health of Michigan for the year ending June 30, 1900, contains, as usual, an interesting study of the relation of meteorological conditions to the prevalence of disease. The statistical material for this comparison is obtained from 214 medical observers who send in weekly reports of the relative prevalence of the diseases which have come under their observation, marking the disease of which most cases have been seen, one, and so on. The percentage of reports stating the presence of any disease gives for each week a sort of morbidity rate which serves very well for comparison of the different seasons. The tables show that bronchitis, pneumonia, membranous croup, diphtheria, tonsilitis, influenza, scarlet fever. rheumatism, neuralgia, pleuritis, and pulmonary consumption, or the "cold-weather" diseases, were reported on more than the average per cent of weekly reports, in months which had a relative humidity. an average per cent of cloudiness, ozone, average velocity of wind, and